

| POSITION                  | INITIALS | ID NO. | DATE     |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION         | H.A.     |        | 07/12/01 |
| O.I.P.E. CLASSIFIER       |          |        | 7/20/01  |
| FORMALITY REVIEW          | S.A.     | 1123   | 08/22/01 |
| RESPONSE FORMALITY REVIEW |          |        |          |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim    | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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